

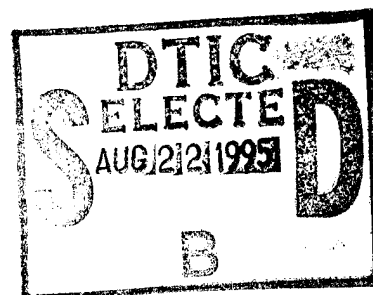
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U.S. NAVY DENTAL CORPS SURVEY OF 1994: ANALYSIS OF NARRATIVE RESPONSES

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Report No. 95-9

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Report No. 95-9 was supported by the Naval Medical Research and Development Command, Department of the Navy, under Work Unit No. 65152N-M0106.001-6422. The views expressed in this article are those of the authors and do not reflect the official policy or position of the Department of the Navy, Department of Defense, or the U.S. Government. Approved for public release, distribution unlimited. The assistance of CAPT Dean Schloyer, Med-06, and LT Todd Allen, Med-06C, is gratefully acknowledged.

EXECUTIVE SUMMARY

Problem

Following recent changes in the organizational structure and mission of the U.S. Navy, the Chief of the Navy Dental Corps requested a study of organizational attitudes, perceptions, and outcomes from the Naval Health Research Center. Decision-support information was needed to better evaluate existing policies, improve management practices, and facilitate long-range planning.

Objective

The purpose of the present study was to assess the attitudes and perceptions of officers within the U.S. Navy Dental Corps as a function of occupational specialty, gender, and career stage (rank).

Approach

An anonymous survey was sent to all active-duty Navy Dental Corps officers. A total of 915 officers responded to the survey. Content analysis was conducted on semi-structured narrative responses. The leading positive aspects and the leading aspects most in need of improvement in the Dental Corps were assessed.

Results

Overall, the leading positive aspects of serving in the U.S. Navy Dental Corps were: camaraderie, training opportunities, professional enrichment, opportunities for travel or particular duty assignments, military/patriotic lifestyle, and Navy-related job conditions. While there was general consistency in the ordering of leading positive aspects across the subspecialties, more periodontists and oral diagnosticians identified training opportunities, whereas more operative dentists and general dentists identified professional enrichment. Lieutenant commanders and commanders identified training opportunities more frequently than did lieutenants or captains, whereas more lieutenants and captains identified on-the-job enrichment. Men identified training opportunities as a positive aspect more frequently than did women, while women identified Navy-related job conditions more often than did men.

The leading aspects of the Dental Corps identified as needing improvement were: adequacy of pay, opportunity for promotion, quality of leadership, impact from various Navy policies, shortage of chairside Dental Corps officers, and excess of administrative/collateral-duty requirements. Oral surgeons, endodontists, and operative dentists identified pay issues more than the other subspecialties. More oral diagnosticians identified chairside staffing shortage, promotion opportunities, and, along with periodontists, administrative/collateral-duty requirements. Males identified needing to improve pay more frequently than did women. Lieutenants emphasized pay more frequently than the other ranks, while more lieutenant commanders and commanders were concerned about promotion.

Conclusions

The results of the study provided valuable information regarding the attitudes and perceptions of Dental Corps officers to the senior leadership of the Dental Corps. This study points to the importance of assessing qualitative information from the membership when defining the issues affecting complex military organizations.

U.S. NAVY DENTAL CORPS SURVEY OF 1994: ANALYSIS OF NARRATIVE RESPONSES

In complex organizations, quality leadership entails the solicitation of membership feedback for problem-solving and problem prevention. The impact from changing conditions on membership attitudes and perceptions is considered highly relevant to the continued success of the organization. To provide such organizational information to the senior leadership of the U.S. Navy Dental Corps, the Chief of the Dental Corps requested that the Naval Health Research Center (NHRC) develop and execute a study to assess organizational issues and outcomes within the Dental Corps. This study would provide specific decision-support information to evaluate existing policies, improve management practices, and facilitate long-range planning.

The initial attitudinal study^{1,2} of the U.S. Navy Dental Corps reported that lieutenants and lieutenant commanders showed the highest relative percent increase in anticipated non-retirement losses. Among lieutenant commanders, turnover intent was disproportionately high for oral/maxillofacial surgeons, periodontists, and endodontists. Moreover, satisfaction with the job, pay, and promotion opportunities were negatively associated with turnover intent. Fifty-three percent of all lieutenants and lieutenant commanders intending to separate from the Navy specified pay or lack of promotion opportunities as the primary reason. The current study includes comparisons with this earlier work.

Previous organizational research³ has suggested that the psychological climate of one's current job situation is determined by: (a) the individual's cognitively based description of the situation, (b) a psychological processing of specific perceptions into more abstract depictions of the psychologically meaningful influences in the situation, (c) situational characteristics that have relatively direct and immediate ties to individual experience, and (d) applicability across a variety of situations. More recently, it was reported⁴ that the characteristics of career stage (rank) significantly affect one's attitudes and job behavior. For example, several authors^{5,6} have noted that during midcareer periods, the importance of career involvement typically declines in response to either internal pressure (e.g., perceived lack of advancement opportunities) or external pressure (e.g., expanded family responsibilities). Additionally, it has been reported that occupational differences may also affect the psychological climate within an organization.^{7,8} That is, significant differences observed within the organization may also be a function of the range of career opportunities available to members in different occupational groups. These findings support the need for the examination of perceptions and attitudes of personnel in terms of both career stage and occupational category.

Therefore, understanding certain complexities of military organizations entails an assessment of the perceptions and attitudes of its membership. The purpose of the present study is to assess the attitudes and perceptions of officers within the U.S. Navy Dental Corps as a function of occupational specialty, career stage, and gender. The assessment in this report will be based on the narrative-response portion of the 1994 survey of U. S. Navy Dental Corps officers.

METHODS

Sample

An anonymous survey was mailed to all active-duty Dental Corps officers (N = 1,444). A total of 915 officers (63%) responded to the survey. As shown in **Table 1**, the majority of the respondents were Caucasian (91%) and male (89%). Twenty-four percent of the sample were active-duty reservists (designator 2205). The mean age of the respondents was 39 years, with a range from 25 to 61 years. Three fifths of the respondents were lieutenants (27%) or lieutenant commanders (33%), and two fifths were commanders (20%) or captains (20%). The distribution of the respondents by subspecialty was as follows: general dentistry (41%), comprehensive dentistry (20%), exodontics or oral/maxillofacial surgery (9%), prosthodontics (9%), periodontics (6%), endodontics (6%), oral medicine/diagnosis (2%), operative dentistry (2%), and other (5%). (The "other" category represents subspecialties with too few respondents for reliable analyses by subspecialty.) A listing of respondent primary subspecialty by education or experience level is presented in **Appendix A**. Approximately 57% of the sample had received a one-year program of advanced education (e.g., General Practice Residency, Advanced Clinical Program) and 42% had participated in a two-or-more-year program (e.g., residency). As **Table 1** indicates, the sample was highly representative of the population of Navy Dental Corps officers on key demographic factors.

Table 1
Demographic Summary
Population N = 1,444*
Survey N = 915 (63%)

Designator			Rank			Gender		
	Pop %	Sample %		Pop %	Sample %		Pop %	Sample %
2200	69	76	LT	33	27	Men	87	89
2205	31	24	LCDR	33	33	Women	13	11
			CDR	18	20			
			CAPT	15	20			
			RADM	<1	<1			
Age			Race			* Population data provided by LT Todd Allen, Med-06C.		
	Pop %	Sample %		Pop %	Sample %			
Mean	32	39	White	86	91			
Std Dev	7.5	7.4	Black	4	3			
Range	24 - 61	25 - 61	Hispanic	3	3			
			Asian	5	2			
			Other	2	1			

Procedure

Based on input from the leadership of the Naval Dental Command and on standardized organizational measures, a 250-item survey was constructed to assess background information, career profile, turnover intent, and perceptions and attitudes regarding a number of Dental Corps issues. To provide some direct comparability to the earlier survey conducted in 1990, items from that survey were included in the 1994 survey. To enhance both objective assessment and comprehensive coverage of Dental Corps issues, both quantitative items, using Likert-type rating scales, and qualitative items, using semistructured narrative responses, were included. The Chief of the Dental Corps reviewed the content of the final questionnaire. A copy of the questionnaire is provided in **Appendix B**.

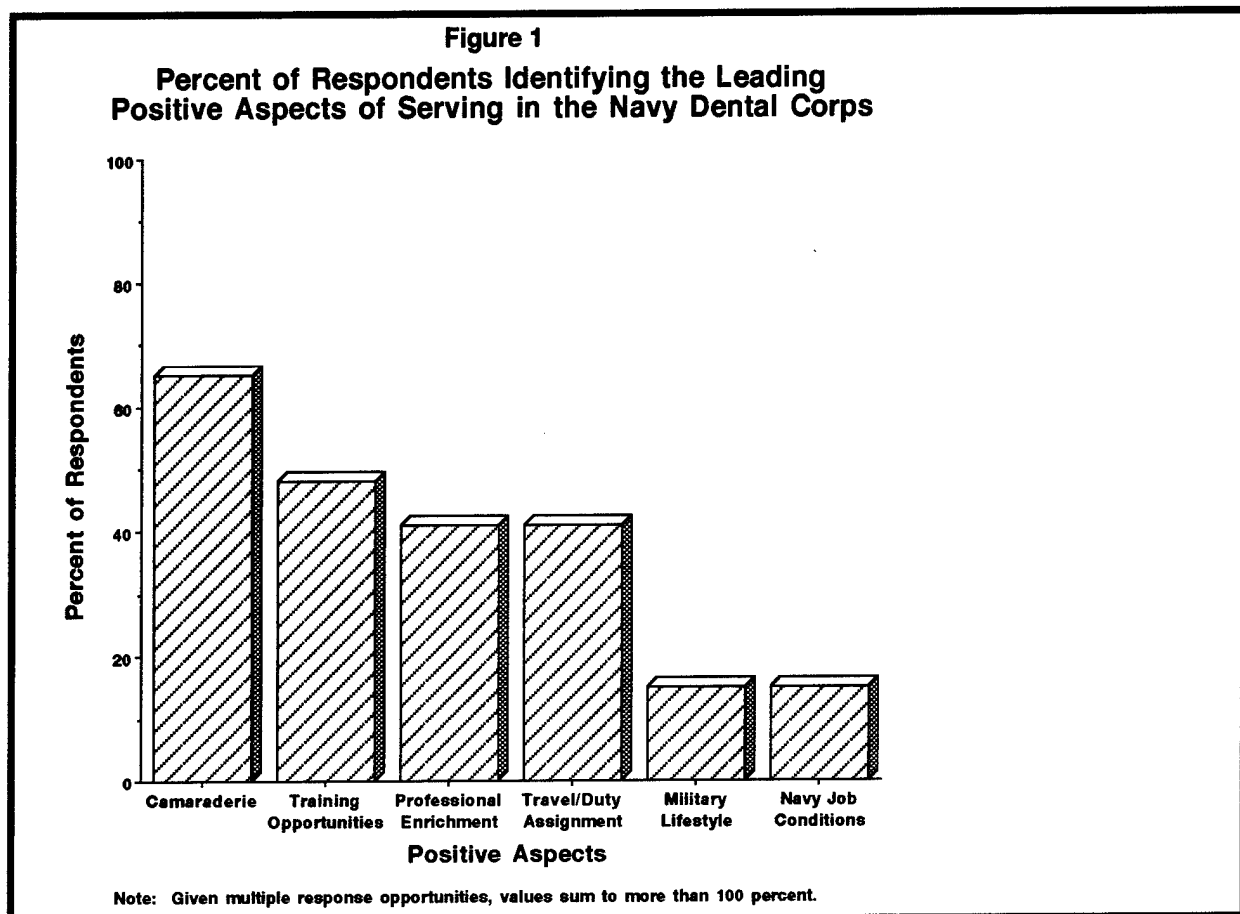
In June 1994, the anonymous survey was mailed to all active-duty Navy Dental Corps officers. Privacy Act issues were addressed in a cover letter from the Chief of the Navy Dental Corps. As the surveys were returned to NHRC, the narrative responses were segregated for content analysis. Additionally, all anonymous narrative responses were detached from the survey, photocopied, and forwarded to the Chief of the Dental Corps. The narrative responses addressed: (a) the most positive aspects of serving in the Dental Corps, and (b) the aspects of the Dental Corps most in need of improvement. These narrative items were also part of the 1990 survey. For reasons of continuity and comparability between the 1990 and 1994 survey data, the coding categories developed from content analysis of the 1990 survey were used as the starting point for the 1994 content analysis. The development of that coding scheme in 1990 involved an iterative process. In the first phase, a list of narrative responses was made from the first 600 surveys that were returned. These responses were grouped into categories on the basis of content similarity. Any subsequent responses that were not yet represented became new categories. Each category was assigned a unique numerical code. When a facet of a coded category became specified by enough respondents, it was given a new code to allow for a subsequent assessment of the proportion of comments that specified that facet. For example, many respondents identified "leadership" as an issue without providing details; many others specified a leadership facet, such as morale or performance evaluation. Hence, separate codes evolved for facets within a category as well as for new categories. As the 1994 content analyses progressed using the same process, the coding scheme remained basically unchanged. At the end of the coding process, an inter-rater reliability test was conducted between two independent coders on a 10% sample of the data. This analysis produced a significant Cohen's kappa of .81 ($p < .001$) and indicated that the coding process was highly reliable. Sample comments within each category are presented in **Appendix C**.

RESULTS

Perceptions and Attitudes

This section describes analyses conducted on the qualitative (narrative) responses. Qualitative responses were provided by a total of 96% ($n = 877$) of all survey respondents. First, response rates for the most positive aspects of Navy dentistry will be presented, including results by rank, sex, and subspecialty. Then, response rates for those aspects of Navy dentistry identified as most in need of improvement will be presented.

Positive Aspects. Narrative response opportunities allowed Dental Corps officers both to identify issues and to express their views about them. As shown in **Figure 1**, results of analyses of responses to the most positive aspects of serving in the Dental Corps indicated that the leading positive aspects were: (a) professional/social camaraderie (65%), (b) training/educational opportunities (48%), (c) on-the-job professional enrichment (41%), (d) opportunities for travel or particular duty assignments (41%), (e) the personal fulfillment of a military/patriotic lifestyle (15%), and (f) certain Navy-related job conditions (15%). Appreciation for camaraderie was expressed in terms of esprit de corps, supportive coworker attitudes, competent coworkers, consultation accessibility, lasting friendships, and other expressions of both professional and social support. Expressions of appreciation for training opportunities included referents to the quality of professional training, the value of officer training, access to continuing education, support in pursuing a specialty residency, and the opportunities for specific training programs. Professional enrichment expressions included concepts of variety (e.g., leadership opportunities, multiple career pathways, clinical rotation opportunities), challenge (e.g., personal growth, professional growth), and working conditions (e.g., opportunities not available to civilians, job satisfaction, job enjoyment, recreational activities). Travel opportunity appreciation encompassed the rewards of cultural exposure, operational tours, shipboard experience, overseas life, specific duty stations, and being "on the move." Military lifestyle appreciation was reflected by comments about service to the country, support of our fighting forces, pride in the



uniform, or dedication to the Navy or the Dental Corps. The Navy-related job conditions that were specified included absence of malpractice and overhead expenses, a ready patient population, freedom from payment-collection concerns, provision for sick leave and vacation time, and the opportunity for early-age retirement.

An inspection of the rank order of the response percentages of the positive aspects by military rank (Figure 2) indicated a general consistency across rank. Deviations involved adjacent categories except for lieutenants. Lieutenants identified both camaraderie (52%) and training opportunities (38%) less frequently than did the other military ranks, but identified professional enrichment (46%) and Navy job conditions (23%) more frequently.

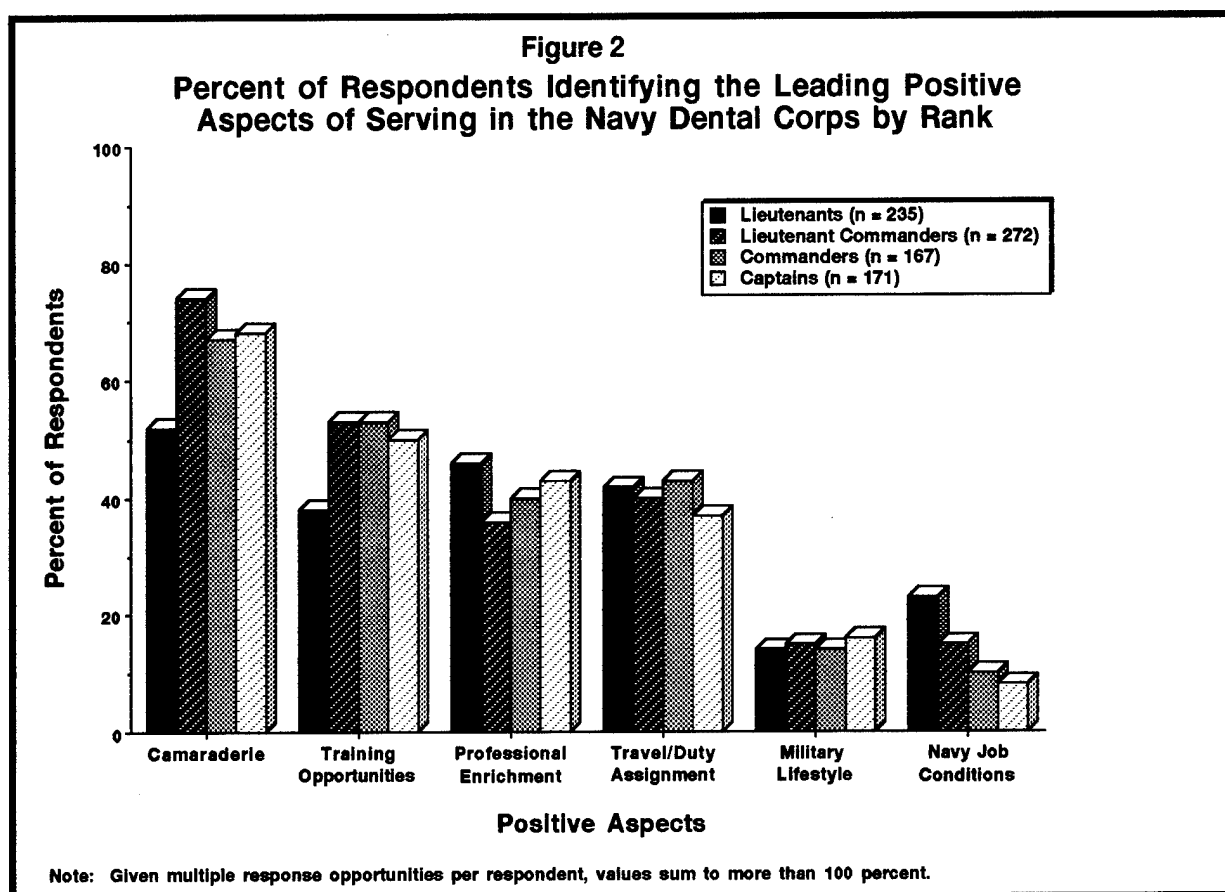
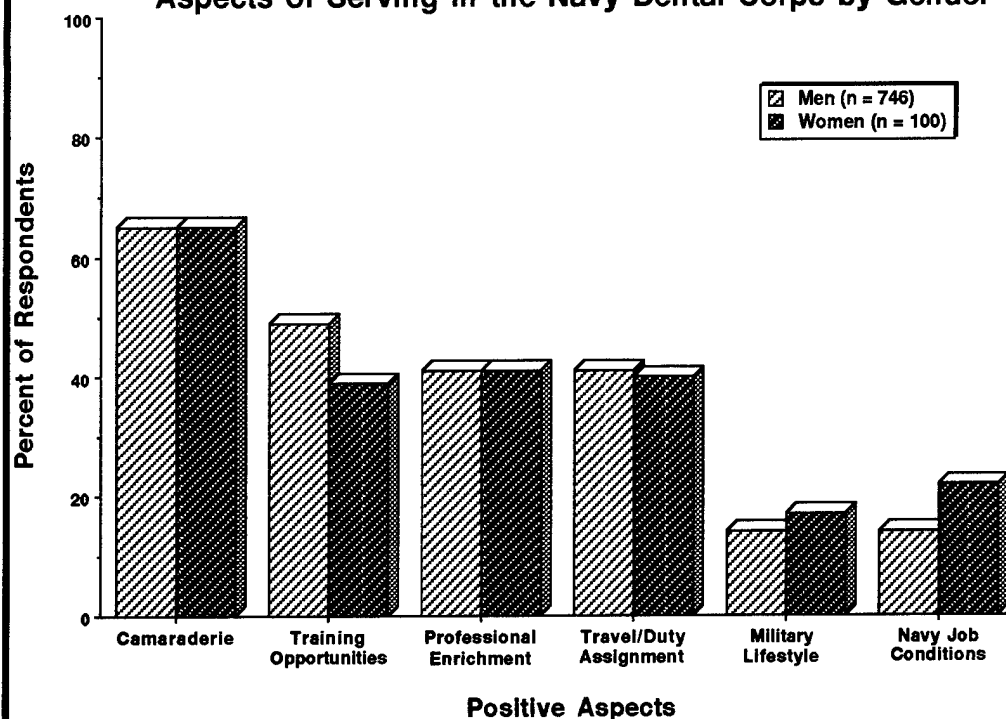


Figure 3 presents response percentages for the leading positive aspects by gender. The frequency of responses matched on camaraderie (65%). However, more men (49%) identified training opportunities as a leading positive aspect than did women (39%), and more women (22%) identified Navy-related job conditions than did men (14%). However, the four most positive aspects were the same for men and women, each more than 38% of respondents.

Table 2 presents response percentages for the leading positive aspects of serving in the Dental Corps by subspecialty. While general consistency was exhibited in the rank ordering of leading aspects across the subspecialties, more periodontists and oral diagnosticians identified training opportunities (67%) than the other subspecialties. General practitioners identified training opportunities (38%) less often while ranking

Figure 3

Percent of Respondents Identifying the Leading Positive Aspects of Serving in the Navy Dental Corps by Gender



Note: Given multiple response opportunities per respondent, values sum to more than 100 percent.

Table 2

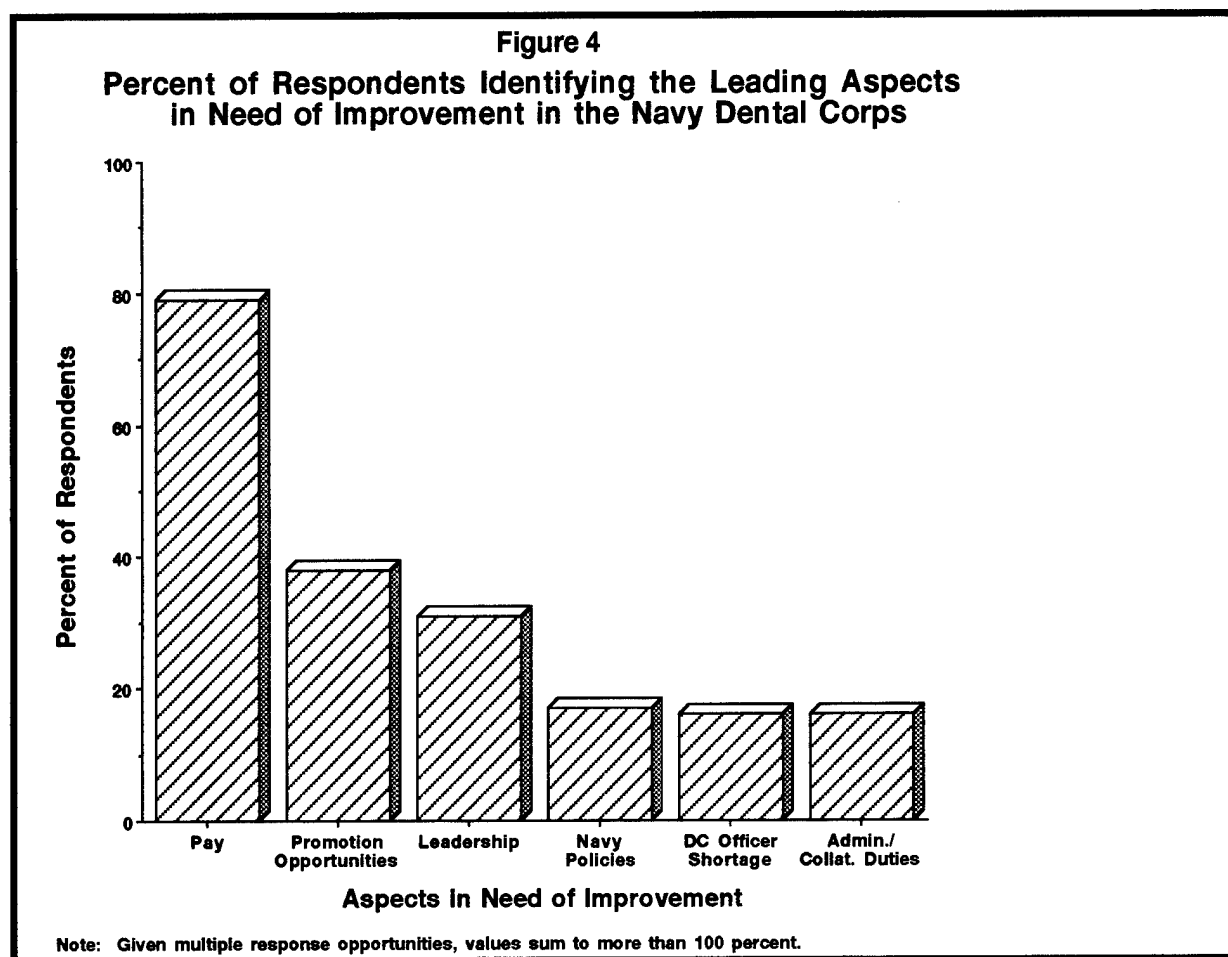
Percent of Respondents Identifying the Leading Positive Aspects of Serving in the Navy Dental Corps by Subspecialty

SUBSPECIALTY	LEADING POSITIVE ASPECTS					
	CAMARADERIE	TRAINING OPPORTUNITIES	TRAVEL/DUTY ASSIGNMENT	PROFESSIONAL ENRICHMENT	MILITARY LIFESTYLE	NAVY JOB CONDITIONS
GENERAL DENTISTRY N = 630, n = 343	61	38	44	44	15	20
COMPREHENSIVE DENTISTRY N = 265, n = 175	69	49	37	43	17	11
ORAL/MAXILLOFACIAL SURGERY N = 148, n = 73	73	64	40	30	12	11
PROSTHODONTICS N = 129, n = 78	72	56	36	35	9	9
PERIODONTICS N = 88, n = 49	69	67	45	39	6	18
ENDODONTICS N = 86, n = 47	77	60	38	30	15	9
ORAL MEDICINE/DIAGNOSIS N = 21, n = 12	75	67	50	33	17	17
OPERATIVE DENTISTRY N = 20, n = 13	62	62	8	46	8	0
OTHER N > 72, n = 39	51	51	33	49	28	15

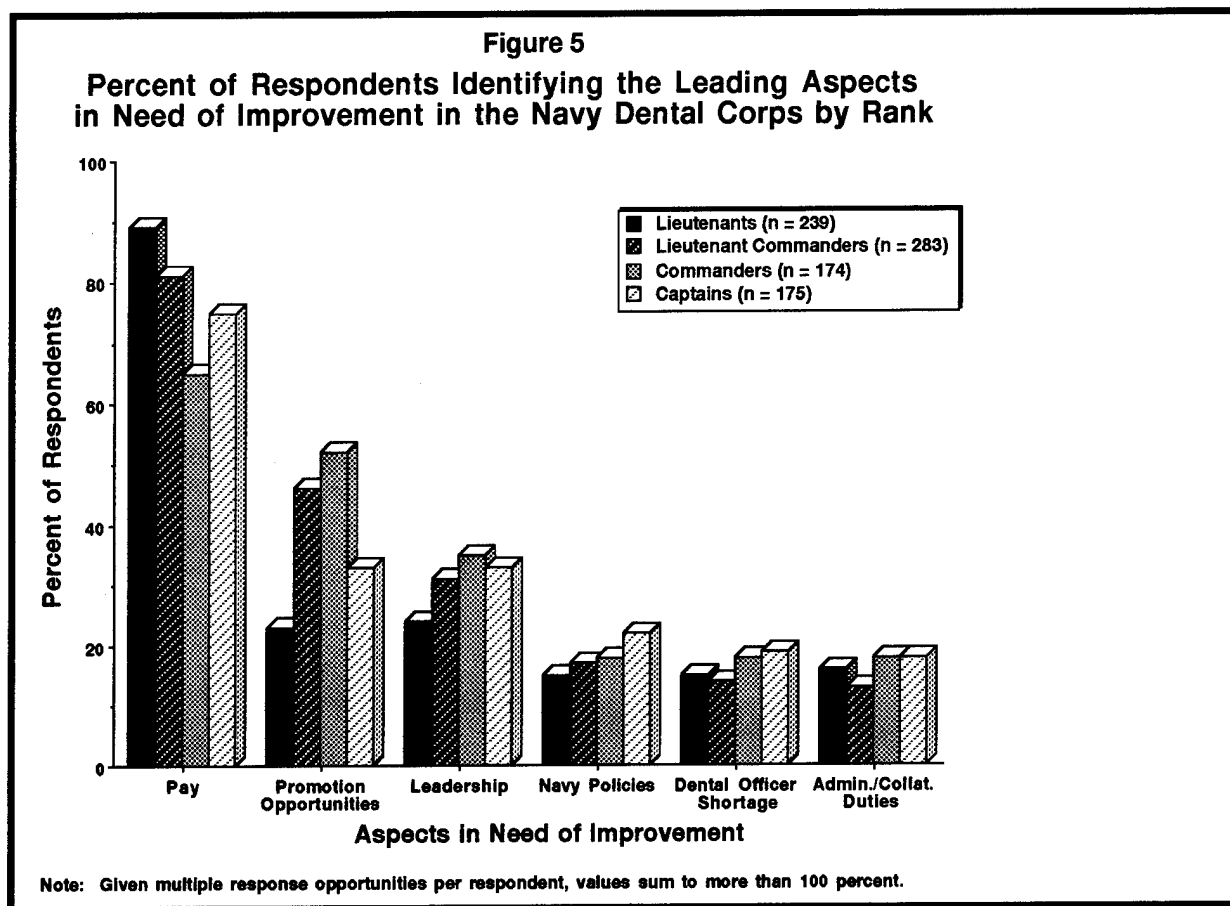
Note: Totals sum to more than 100 percent due to multiple response options.

on-the-job enrichment relatively high (2nd/3rd, at 44%). Oral diagnosticians identified travel/duty assignments the most frequently (50%), while operative dentists identified it the least (8%), creating the greatest difference (42%) between categories.

Aspects in Need of Improvement. Comments regarding the three aspects of the Navy Dental Corps judged most in need of improvement were also analyzed (**Figure 4**). The leading aspects of the Dental Corps identified as needing improvement were pay (e.g., inadequacies, inequities, need for debt relief; 79%), promotion (e.g., restrictions, inequities; 38%), and leadership (e.g., quality, quantity, style, structure, Total Quality Management [TQM] implementation, performance evaluations; 31%). Aspects identified less frequently included: (a) current Navy policies (e.g., regarding civilian contractors, military budget allocations, the Defense Officer Personnel Management Act [DOPMA], equal opportunity practices, Dental Corps autonomy; 17%), (b) the shortage of chairside Dental Corps officers (16%), and (c) the excess of administrative or collateral-duty requirements (16%).



Although the rank ordering of response percentages for the leading aspects in need of improvement are generally consistent across ranks, interesting differences appear to exist (**Figure 5**). Lieutenants, for example, tend to emphasize pay more often (89%) than do other ranks. This is likely related to educational debt, which, for lieutenants, is an average of \$48,999. Additionally, lieutenant commanders (46%) and commanders (52%) appear to be more concerned with lack of promotion opportunities than are lieutenants (23%) or captains (33%).



An examination of the results by gender for the leading aspects in need of improvement revealed no rank-ordering differences in the top four responses (Figure 6). However, fewer women identified pay (71%) than did men (80%), irrespective of marital status, as well as promotion (35% vs. 39%), and more identified leadership issues (34% vs. 30%).

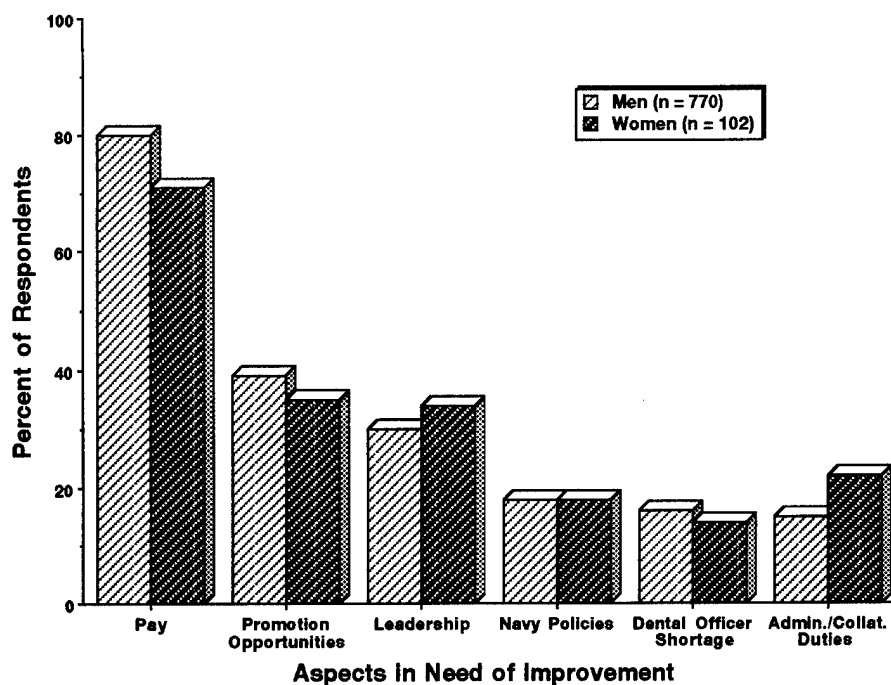
Oral surgeons (88%), endodontists (85%), and operative dentists (85%) identified pay issues more frequently than the other subspecialties (Table 3). More oral diagnosticians identified chairside staffing shortage (ranked 3rd at 53%), promotion opportunity (60%), and, along with periodontists (22%), administrative/collateral-duty requirements (20%). Oral diagnosticians (13%) identified leadership issues less than other subspecialties.

DISCUSSION

As a means of assessing organizational issues, the qualitative item in a questionnaire has the advantages of efficiently allowing the respondent to define the issues, rather than to select from a predefined set, and to elaborate on why or how each issue affects him/her. Those advantages are, in part, offset by the limitations imposed by analysis of narrative content, which involves analyst interpretation and judgment. Though the process includes measures to minimize subjectivity (well accomplished in the present study, evidenced by the Cohen's kappa coefficient of .81), it also requires that judgments

Figure 6

Percent of Respondents Identifying the Leading Aspects in Need of Improvement in the Navy Dental Corps by Gender



Note: Given multiple response opportunities per respondent, values sum to more than 100 percent.

Table 3

Percent of Respondents Identifying the Leading Aspects in Need of Improvement in the Navy Dental Corps By Subspecialty

SUBSPECIALTY	LEADING ASPECTS IN NEED OF IMPROVEMENT					
	PAY	PROMOTION OPPORTUNITY	LEADERSHIP	NAVY POLICIES	DENTAL OFFICER SHORTAGE	ADMIN./COLLAT. DUTY REQUIREMENTS
GENERAL DENTISTRY N = 630, n = 351	83	31	28	15	15	18
COMPREHENSIVE DENTISTRY N = 265, n = 175	72	46	32	26	17	14
ORAL/MAXILLOFACIAL SURGERY N = 148, n = 77	88	40	25	17	21	10
PROSTHODONTICS N = 129, n = 80	75	41	31	19	14	14
PERIODONTICS N = 88, n = 50	66	40	42	12	16	22
ENDODONTICS N = 86, n = 52	85	52	40	10	17	13
ORAL MEDICINE/DIAGNOSIS N = 21, n = 15	80	60	13	13	53	20
OPERATIVE DENTISTRY N = 20, n = 13	85	31	31	23	8	0
OTHER N > 72, n = 41	73	46	37	17	15	17

Note: Totals sum to more than 100 percent due to multiple response options.

be made about overlapping concepts (e.g., consider the overlap of the concepts included in a job-security concern elaborated on in terms of limited opportunities for promotion in the post-DOPMA Navy under circumstances of an evaluation process that is perceived to weigh administrative performance more heavily than clinical.) Thus, comprehensive coverage is gained at the expense of more objective analysis.

Nonetheless, the qualitative approach to assessing organizational issues can yield both valid and informative results. The results of this survey strongly echo the 1990 results. Once again, camaraderie, training opportunities, professional enrichment, and travel opportunities were the leading positive issues. It is clear from the replication of results that these four aspects of the Dental Corps are still available and are well appreciated by Dental Corps membership.

However, there are also some apparent differences between the results obtained in the present study and the study conducted in 1990, which had a 70% response rate. Specifically, under the leading positive issues, the percent of respondents citing the quality of delivered care decreased from 20.5% in 1990 to 11.0% in 1994. This decrease may reflect a drop in relative satisfaction and/or in relative personal importance. Other noteworthy changes occurred under the leading aspects in need of improvement. The percent of respondents indicating dissatisfaction with enlisted staffing (19.6%) and dissatisfaction with the competence of enlisted staff (14.7%) reported in 1991 decreased to 8.0% and 9.0%, respectively. This decrease in the percent of dissatisfaction would appear to be a positive change in the area of support staff. With regard to the current study, the emergence of Dental Corps officer shortage and Navy policies points to a shift in concerns that may warrant closer examination.

This study points to the value of examining organizational issues as a function of career stage and occupational specialty. In addition to considering aspects the membership finds rewarding, a rounded assessment of organizational climate also invites feedback on those aspects the membership finds problematic. Clearly, the overriding issue for Dental Corps officers continues to be pay -- the only issue targeted by a majority of the respondents in 1990 (52%) and again in 1994 (79%). Furthermore, the substantive jump in the proportion of respondents specifying pay concerns identifies it as a growing problem. The tone of the responses that elaborated on pay objections ranged from resentment over perceived inequities, especially vis-a-vis civilian counterparts or Medical Corps officers, to frustration, to anger, and to despair from feeling overwhelmed by educational-loan debt. Many comments requested increases in salaries, bonuses, professional pay, or specialty pay, or recommended an effective loan deferment program. As suggested in 1990, Dental Corps leadership, in addition to supporting the aggressive pursuit of pay concessions from Congress, could help ameliorate this problem by convincing Dental Corps members of their awareness of the hardship involved and of their resolve to alleviate it.

Also continuing to be a critical issue for Dental Corps officers is promotion opportunity. It is the second leading issue again, as identified by 39% of respondents in 1990 and 38% in 1994. Respondents expressed concern in terms of restricted promotion

opportunities, insufficient objectivity in the evaluation process, and overemphasis on nonclinical criteria. In today's Navy, failure to get promoted may engender involuntary loss of military employment. The 1990 analysis, which included narrative responses regarding the primary reasons for one's career intent, identified pay or lack of promotion opportunity as the primary reason for intent to separate from active duty for 53% of lieutenants and lieutenant commanders. That these two leading issues are so removed from the direct control of Dental Corps leadership all but forces the recourse to creative problem-solving in addressing them.

Leadership, the last of the notable leading issues for improvement, grew from a concern for 18% of 1990 respondents to 31% of 1994 respondents. More so than most, this category of response captured many overlapping concepts, some of which were deliberately segregated, namely into categories for dissatisfaction with morale, recognition/support, or career guidance. Not segregated were concepts specifying dissatisfaction with TQM implementation, with evaluation implementation, with top-heavy leadership structure, and with the perceived quality or competence of leaders, especially in terms of supplying appropriate communication, posing as positive role models, delegating authority, exercising objectivity, practicing fair treatment, and promoting teamwork. All combined, 44% of the respondents targeted these leadership concepts with the following breakdown of overlapping concepts: morale, 4%; recognition/support, 14%; career guidance, 6%; TQM, 3%; performance evaluations, 11%; all others, 21%. (Note that due to multiple response opportunity, these figures are not strictly additive.) Hence, the encompassing nature of leadership contributes to its high response rate. Perhaps, the notion to weigh more heavily additional leadership training as a promotion criterion is the start of a creative solution to two of the three leading issues for Dental Corps officers.

The results of this study provide an assessment of the perceptions and attitudes of Dental Corps officers. The method allowed Dental Corps officers to define organizational issues from their viewpoint. They identified camaraderie, training opportunities, professional enrichment, and travel opportunities as particularly rewarding aspects of naval dentistry. They also identified pay, promotion, and leadership as leading concerns. Their feedback can serve as valuable information to Dental Corps leaders tackling policy evaluation, issue identification, and organizational planning. Analysis of the survey's quantitative data will be covered in a subsequent report.

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Appendix A

Respondent Primary Subspecialty By Education Level

Subspecialty	Percent										Total n %
	D:	S:	P:	V:	J:	K:	missing data n	Total n %			
	DDS/ DMD	Significant Experience	Master's Degree	Formal Preparation	Fully Trained	Board Certified					
1700 General Dentistry	37	38	<1	17	5	2	40	363	41		
1725 Comprehensive Dentistry	0	14	2	37	22	25	3	183	20		
1750 Oral/Maxillofacial Surgery	0	18	0	21	22	39	1	84	9		
1769 Prosthodontics	1	13	1	9	59	17	4	81	9		
1760 Periodontics	0	5	2	9	40	44	0	55	6		
1710 Endodontics	0	8	2	26	34	30	0	53	6		
1745 Oral Medicine/Diagnosis	0	7	0	7	7	79	0	15	2		
1740 Operative Dentistry	8	0	8	0	42	42	2	14	2		
1795 Pediatric Dentistry	0	0	0	0	82	18	0	11	1		
1735 Orthodontics	0	0	0	0	71	29	0	7	1		
1720 Dental Education Programs	25	50	0	25	0	0	3	7	1		
1775 Public Health Dentistry	0	0	33	17	17	33	0	6	1		
1780 Oral Pathology	0	0	0	0	40	60	0	5	1		
1730 Maxillofacial Prosthodontics	0	0	0	0	50	50	0	4	<1		
1790 Dental Science and Research	0	0	0	0	100	0	0	1	<1		
1806 Health Care Management	0	100	0	0	0	0	0	1	<1		
Total:							53	892	100		

Appendix B

A Copy of the Dental Corps Survey

DENTAL CORPS SURVEY

Privacy Act Statement

1. **Authority.** 5 USC 301, 10 USC 1071. 2. **Purpose.** Medical research information will be collected to enhance basic medical knowledge or to develop tests, procedures, and equipment to improve the diagnosis, treatment, or prevention of illness, injury or performance impairment. 3. **Use.** Medical research information will be used for statistical analyses and reports by the Departments of the Navy, Defense, and other U.S. government agencies, provided this is compatible with the purpose for which the information was collected. Use of the information may be granted to non-Government agencies or individuals by the Chief, Bureau of Medicine and Surgery, in accordance with the provisions of the Freedom of Information Act. 4. **Disclosure.** I understand that all information derived from the study will be retained at the Naval Health Research Center, San Diego, and that my anonymity will be maintained. I voluntarily agree to its disclosure to agencies or individuals identified in the preceding paragraph, and I have been informed that failure to agree to such disclosure may negate the purposes of the study.

Subspecialty Codes: (for item #2, below)

1700 General Dentistry	1745 Oral Medicine/Oral Diagnosis	1780 Oral Pathology
1710 Endodontics	1750 Oral and Maxillofacial Surgery	1790 Dental Science and Research
1720 Dental Education Programs	1760 Periodontics	1795 Pediatric Dentistry
1725 Comprehensive Dentistry	1769 Prosthodontics	1806 Health Care Management
1730 Maxillofacial Prosthodontics	1775 Public Health Dentistry	1907 Health Services Quality Assurance
1740 Operative Dentistry		

Suffix Codes (for item #2, below; select the letter which best applies):

D - Doctorate Level of Education	K - Board Certified	S - Significant Experience
J - Fully Trained	P - Masters Level of Education	V - Formal Preparation

Directions: The following questions concern your general background. Please circle the number corresponding to the most appropriate answer or provide the indicated written response.

1. Rank: O - _____
2. Subspecialty Codes (Enter code numbers; refer to list above for assistance):

	Subspecialty Code	Suffix Code
Primary:	_____	_____
Secondary:	_____	_____
Tertiary:	_____	_____

3. What is your designator?
1. 2200 (USN)
2. 2205 (USNR)
3. Other; enter the number: _____

4. Age: ____

5. Sex: 1. Male 2. Female (circle one)

6. Marital Status:

1. Single
2. Married
3. Separated/Divorced
4. Other; specify: _____

7. Race:

1. White 4. Filipino/Pacific Islander
2. Black 5. Asian
3. Hispanic 6. Other: _____

8. Number of dependent children living in your primary residence. (If none, enter zeros.)

(Ages 1-12) (Ages 13-17)

9. If you are currently married, what is the highest level of education of your spouse?

1. N/A; not currently married
2. High school graduate
3. Some college
4. Bachelor's degree
5. Some graduate work
6. Master's degree
7. Post-master's work
8. Doctorate degree
9. Post-doctorate study

10. Education:

Dental degree (DDS/DMD):	1. Yes	2. No
Specialty Certificate:	1. Yes	2. No
Masters-level degree (MA/MS):	1. Yes	2. No
Ph.D.-level degree:	1. Yes	2. No

11. Year you graduated from dental school:

19 ____

12. End of Active Obligated Service (if 2205) or DOPMA (if 2200):

19 ____

13. How long have you been on active duty as a Dental Corps officer?

____ + ____
Years Months

14. Are you presently serving overseas?

1. Yes
2. No

15. Did the Navy provide financial assistance toward your basic dental education?

1. Yes
2. No

16. Have you received advanced dental education?

One-year program (e.g., GPR, ACP):

1. Yes, In-service
2. Yes, civilian
3. No

Two-or-more-year program (e.g., dental residency):

1. Yes, In-service
2. Yes, civilian
3. No

17. Did the Navy provide financial assistance for your advanced dental education?

One-year program (e.g., GPR, ACP):

1. Yes
2. No
3. Not applicable

Two-or-more-year program (e.g., dental residency):

1. Yes
2. No
3. Not applicable

18. What is your current level of debt that you owe for the cost of your education? (If none, enter "0.")

1. \$ _____ .

19. On the average, how many hours per week do you spend on **each** of the following?

Hrs/Wk

- ___ Direct patient care
- ___ Training (Dental CE, BLS and ATLS, etc.)
- ___ Collateral duties (e.g., QA/RM coordinator, committees, etc.)
- ___ All other organizational/professional duties (Duty, meetings, etc.)
- ___ **Total** hours worked per week

20. Overall, your physical health is:

1. Excellent
2. Good
3. Average
4. Below average
5. Poor

21. How many people do you directly supervise?

1. None
2. 1 - 3
3. 4 - 6
4. 7 - 9
5. 10 or more

22. Current Duty Station (Circle the most appropriate option):

1. Annex dental clinic
2. Branch dental clinic
3. Headquarters dental clinic
4. Naval dental school staff
5. Hospital staff
6. GPR, Specialty Residence or ACP
7. Sea duty
8. FMF duty
9. Mobile construction battalion
10. Other staff duty (e.g., BUMED, NMPC)
11. Other, specify: _____

23. Years served in **each** duty assignment during Navy career (Round to nearest year):

- ___ Annex dental clinic
- ___ Branch dental clinic
- ___ Headquarters dental clinic
- ___ Naval dental school staff
- ___ Hospital staff
- ___ GPR, Specialty Residence or ACP
- ___ Sea duty
- ___ FMF duty
- ___ Mobile construction battalion
- ___ Other staff duty (e.g., BUMED, NMPC)
- ___ Other, specify: _____

24. Current Billet (Circle the most appropriate option):

1. Assistant Dental officer
2. Dental officer
3. Director, dental services
4. Head, annex dental officer
5. Department head
6. Branch director
7. Executive Officer
8. Commanding Officer
9. Staff officer (e.g., BUMED, NMPC, HSETC)
10. Naval dental school staff
11. Other: _____

25. Years served in **each** capacity during Navy career (Round to nearest year):

- ___ Assistant Dental officer
- ___ Dental officer
- ___ Director, dental services
- ___ Head, annex dental officer
- ___ Department head
- ___ Branch director
- ___ Executive Officer
- ___ Commanding Officer
- ___ Staff officer (e.g., BUMED, NMPC, HSETC)
- ___ Naval dental school staff
- ___ Other: _____

26. Total number of years assigned overseas duty:

___ years. (Round to nearest year.)

27. To what extent does the position you currently occupy match your level of training, experience, and ability?

1. Not at all
2. To a small extent
3. To some extent
4. To a great extent
5. To a very great extent

28. Prior to your Dental Corps commission, how much military experience did you have? (Circle one per column.)

- | <u>Enlisted</u> | <u>Officer</u> |
|--------------------|--------------------|
| 1. None | 1. None |
| 2. < 1 year | 2. < 1 year |
| 3. 1 - 4 years | 3. 1 - 4 years |
| 4. 5 - 8 years | 4. 5 - 8 years |
| 5. 9 or more years | 5. 9 or more years |

3. How does your spouse, parent, or whoever is most important to you, feel about you being in the Navy? (Circle only one):

1. Wants me to get out as soon as possible.
2. Thinks I should get out but says it's up to me.
3. Doesn't care one way or the other.
4. Thinks I should stay in but says it's up to me.
5. Thinks the Navy is a good career choice.

4. If given the opportunity, during the next year you would: (circle only one)

1. Definitely leave the Dental Corps.
2. Probably leave the Dental Corps.
3. Not sure about leaving or staying with the D.C.
4. Probably stay with the D.C. for the next year.
5. Definitely stay with the Dental Corps.

5. What are your plans to stay with the Navy? (Circle one.)

1. I intend to stay until I retire.
2. I will leave only if an excellent opportunity turns up.
3. I will leave if something better turns up elsewhere.
4. I will leave unless something better turns up here.
5. I intend to leave as soon as possible.

The following seven items refer to different feelings individuals may have about remaining in the Navy. Please circle the number that best describes your feelings at the present time.

1. If you stay in the Dental Corps through the next year, how likely is it that your career/professional needs will be met?

1. Very likely
2. Likely
3. Neither likely nor unlikely
4. Unlikely
5. Very unlikely

2. If you left the Dental Corps, would you stay in your same type of work (i.e., general dentistry, endodontics, periodontics)?

1. Definitely yes
2. Probably yes
3. Do not know
4. Probably no
5. Definitely no

6. How likely is it that you can leave your job with the Navy and get one like it somewhere else?

1. Not at all likely
2. Somewhat unlikely
3. As likely as not
4. Likely
5. Very likely

7. Do you plan to augment?

1. (Not applicable)
2. Definitely yes
3. Probably yes
4. Do not know
5. Probably no
6. Definitely no

Use the scales provided to rate the degree with which you agree with the following questions.

Strongly
Agree
1

Agree
2

Neutral
3

Disagree
4

Strongly
Disagree
5

- _____ 1. Fitness reports effectively convey an officer's promotability to promotion/selection boards and detailers.
- _____ 2. Fitness reports provide a candid assessment of an officer's strengths and weaknesses.
- _____ 3. The ranking of senior officers (O-4 and above) against each other is an effective grade-inflation control.
- _____ 4. I feel that junior officers should be ranked.
- _____ 5. Grade boxes on fitness reports add additional information on performance that helps promotion/selection boards and detailers assess an officer's promotability, strengths, and weaknesses.
- _____ 6. Fitness reports provide an adequate description of the scope of an officer's job.
- _____ 7. The narrative section of the fitness report is usually well written and provides promotion/selection boards and detailers with useful and accurate information.
- _____ 8. The results of my fitness reports have had no adverse effects upon my selection for promotions or choice of duty stations.
- _____ 9. I feel that fitness reports are an objective and unbiased way to assess an officer's promotability and performance.

Please answer each question by circling the number that best describes how things have been going on the job for you during the prior week.

During LAST WEEK, how well were you doing at:

	Extremely Poor	Poor	Somewhat Below Average	All Right	Somewhat Above Average	Very Well	Extremely Well
1. Handling daily responsibilities and demands of your work?	1	2	3	4	5	6	7
2. Making the right decisions?	1	2	3	4	5	6	7
3. Performing without mistakes?	1	2	3	4	5	6	7
4. Getting things done on time?	1	2	3	4	5	6	7
5. Getting along with others at work?	1	2	3	4	5	6	7
6. Avoiding arguments with others?	1	2	3	4	5	6	7
7. Handling disagreements by compromising and meeting people half-way?	1	2	3	4	5	6	7

Please use the scale on the left to rate your **satisfaction** with each of the following aspects of the Navy Dental Corps. Use the scale on the right to rate the **importance** of each item in your decision to remain in the Navy or separate/retire. If you are close to retiring, how important has each been in your decision to stay in the Navy? (Circle one number per item per scale.)

Very Dissatisfied						Very Satisfied					Not at all Important					Very Important				
1	2	3	4	5		1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Educational opportunities	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Professional camaraderie	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Travel	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Job security	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Retirement benefits	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Military lifestyle	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Pay	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Healthy patient population	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Medical benefits	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Promotion opportunities	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Personal recognition	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Job challenge and variety	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Family-life compatibility	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Equipment and facilities	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	PCS moves	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Professional growth	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Dental technical support staff	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Quality</u> of auxiliary help	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Availability</u> of auxiliary help	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Quality</u> of laboratory support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Availability</u> of laboratory support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Quality</u> of administrative support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Availability</u> of administrative support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Quality</u> of equipment repair support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	<u>Availability</u> of equipment repair support	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
1	2	3	4	5	Infection control procedures	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5

Please use the following scale to rate your agreement or disagreement with each of the following statements (circle one number for each question):

	Strongly Disagree	Undecided			Strongly Agree
1. Even after overhead expenses, I could make much more money in the private sector.	1	2	3	4	5
2. I have too many collateral duties.	1	2	3	4	5
3. The Navy Dental Corps provides excellent training opportunities.	1	2	3	4	5
4. Navy dental residency programs are as good as or better than civilian dental residency programs.	1	2	3	4	5
5. The 4-year time-in-service eligibility requirement for Navy dental residency programs is too long.	1	2	3	4	5
6. I am satisfied with the career planning guidance I have received from my <u>assignment</u> officer.	1	2	3	4	5
7. I am satisfied with the career planning guidance I have received from my <u>career development</u> officer.	1	2	3	4	5
8. My job interferes with my family life and responsibilities.	1	2	3	4	5
9. This command provides a very high quality of dental care.	1	2	3	4	5
10. I would like a greater opportunity to do research.	1	2	3	4	5
11. My work day is too long.	1	2	3	4	5
12. I currently perform the job I was professionally trained to do.	1	2	3	4	5
13. Promotion requirements in the Dental Corps are clearly understood.	1	2	3	4	5
14. <u>Junior</u> officers in the Dental Corps receive Permanent Change of Station assignments too frequently.	1	2	3	4	5
15. <u>Junior</u> officers in the Dental Corps receive operational assignments too frequently in their careers.	1	2	3	4	5
16. All specialties in the Dental Corps receive equal and fair treatment regarding career advancement opportunities.	1	2	3	4	5
17. The equipment used in Navy dentistry is adequate for providing good health care.	1	2	3	4	5
18. I am concerned about acquiring an infectious disease from a patient (e.g., AIDS).	1	2	3	4	5
19. I am concerned about retaining my Navy position during downsizing.	1	2	3	4	5
20. The Dental Corps could increase retention by offering better financial incentives.	1	2	3	4	5
21. The Dental Corps should develop and implement an educational loan payback program for officers who augment or who remain on active duty for 20 years.	1	2	3	4	5
22. The Dental Corps should reinstate its pay credit policy for completing four years of dental school.	1	2	3	4	5
23. Navy Dental Corps specialty pay should be adjusted to match civilian pay levels for like specialties.	1	2	3	4	5

Circle the number corresponding to the most appropriate answer.

1. Have you received any formal training on Total Quality Leadership (TQL)? 1. Yes 2. No
2. Do you feel that your command utilizes any of the principles of TQL? 1. Yes 2. No
3. Do you utilize any of the principles of TQL? 1. Yes 2. No
4. Are you satisfied that TQL will contribute positively to the Navy work environment? 1. Yes 2. No

The following issues have been suggested as major concerns to individuals as they progress through their career. Please rate each of the following issues according to the importance you attach to it at this time in your life. Circle the number which best indicates how you currently feel about the issue.

	An Extremely Important Issue	An Important Issue	A Somewhat of an Issue	A Generally Important Issue	Not at all Important
1. Achieving financial security after retirement.	1	2	3	4	5
2. Obtaining education and training opportunities.	1	2	3	4	5
3. Having good sponsors or mentors who can guide and assist with my career.	1	2	3	4	5
4. Preparing for my second career after retirement.	1	2	3	4	5
5. Getting the billets that help me to get promoted.	1	2	3	4	5
6. Getting good ratings on my fitness report.	1	2	3	4	5
7. Feelings of integrity.	1	2	3	4	5
8. Achieving my military career goals.	1	2	3	4	5
9. Gaining freedom from economic burdens.	1	2	3	4	5
10. Gaining greater closeness with family and/or friends.	1	2	3	4	5
11. Fulfillment of personal emotional needs.	1	2	3	4	5
12. Job security.	1	2	3	4	5
13. Adapting to growth and change in my spouse.	1	2	3	4	5
14. Opportunities for advancement.	1	2	3	4	5
15. Meeting other family needs.	1	2	3	4	5
16. Adapting to growth and changes in my children.	1	2	3	4	5
17. Adapting to changes in society.	1	2	3	4	5
18. Cost of living in different areas.	1	2	3	4	5
19. Housing.	1	2	3	4	5
20. Medical care.	1	2	3	4	5
21. Schools.	1	2	3	4	5
22. Churches.	1	2	3	4	5
23. Social/recreational opportunities.	1	2	3	4	5
24. Where I live.	1	2	3	4	5

For the following items, please use the scale provided to rate the degree to which the condition is true for you in your work environment.

	Very true						Very false
1. I feel certain about how much authority I have.	1	2	3	4	5	6	7
2. There are clear, planned goals and objectives for my job.	1	2	3	4	5	6	7
3. I know exactly what is expected of me.	1	2	3	4	5	6	7
4. I know I divide my time properly.	1	2	3	4	5	6	7
5. I know what my responsibilities are.	1	2	3	4	5	6	7
6. Explanation of what has to be done is clear.	1	2	3	4	5	6	7
7. I receive an assignment without the manpower to carry out an assignment.	1	2	3	4	5	6	7

Below are a number of different aspects of organizational life. Please indicate how much stress you feel because of these aspects. Place the appropriate number in the blank next to each question.

No stress at all			A fair but tolerable amount			An extreme amount of stress
1	2	3	4	5	6	7

How much stress is caused by:

1. _____ Politics, rather than performance, affecting organizational decisions.
2. _____ Not clearly understanding what is expected of you on your job.
3. _____ The lack of training and development opportunities.
4. _____ Receiving conflicting demands from your supervisor.
5. _____ Management not being receptive to input from the employee.
6. _____ Having too much work to do and not enough time to do it.
7. _____ The quality of supervision you receive.
8. _____ The pay that you receive.
9. _____ Having responsibility for others.
10. _____ Not using your skills, knowledge, or abilities to their fullest extent.
11. _____ Not having adequate training to complete your job.
12. _____ High performance standards.
13. _____ The lack of job security.
14. _____ Your promotion progress.
15. _____ The way the authority system is structured (including required red tape and paperwork).
16. _____ Deadlines and/or time schedules.
17. _____ The nature of the work you do.

Based on the information provided above, for each of the two questions below, to what extent does the stress you experience on the job: (Circle one number for "a" and one number for "b.")

a. Bother or upset you?

1. not at all
2. to a small extent
3. to some extent
4. to a great extent
5. to a very great extent

b. Interfere with your job performance?

1. not at all
2. to a small extent
3. to some extent
4. to a great extent
5. to a very great extent

1. When it comes to making decisions about your career, to what extent do you seek advice from the following people?

	N/A	Not at all	To a small extent	To some extent	To a great extent	To a very great extent
a. A peer	0	1	2	3	4	5
b. A senior officer	0	1	2	3	4	5
c. A junior officer	0	1	2	3	4	5
d. Your spouse	0	1	2	3	4	5
e. A close friend	0	1	2	3	4	5

2. When it comes to making decisions about your career, to what extent do you consider the needs of the following people?

a. A peer	0	1	2	3	4	5
b. A senior officer	0	1	2	3	4	5
c. A junior officer	0	1	2	3	4	5
d. Your spouse	0	1	2	3	4	5
e. A close friend	0	1	2	3	4	5

In this section you are asked to describe, as objectively as possible, the nature of your job. Each question has a seven-point scale. Please circle the number at the appropriate level of the scale that best describes each listed job characteristic.

1. How much autonomy is there in your job? That is, to what extent does your job permit you to decide on your own how to go about doing the work?

1 ————— 2 ————— 3 ————— 4 ————— 5 ————— 6 ————— 7

Very little; the job gives me almost no personal "say" about how and when the work is done.

Moderate autonomy; many things are standardized and not under my control, but I can make some decisions about the work.

Very much; the job gives me almost complete responsibility for deciding how and when the work is done.

2. To what extent does your job involve doing a "whole" and identifiable piece of work? That is, is the job a complete piece of work that has an obvious beginning and end? Or is it only a small part of the overall piece of work, which is finished by other people or by automatic machines?

1 ————— 2 ————— 3 ————— 4 ————— 5 ————— 6 ————— 7

My job is only a tiny part of the overall piece of work; the results of my activities cannot be seen in the final product or service.

My job is a moderate-sized "chunk" of the overall piece of work; my own contribution can be seen in the final outcome.

My job involves doing the whole piece of work from start to finish; the results of my activities are easily seen in the final product or service.

3. How much variety is there in your job? That is, to what extent does the job require you to do many different things at work, using a variety of your skills and talents?

1 ————— 2 ————— 3 ————— 4 ————— 5 ————— 6 ————— 7

Very little; the job requires me to do the same routine thing over and over again.

Moderate variety.

Very much; the job requires me to do many different things, using a number of different skills and talents.

4. In general, how significant or important is your job? That is, are the results of your work likely to significantly affect the lives or well-being of other people?

1 ————— 2 ————— 3 ————— 4 ————— 5 ————— 6 ————— 7

Not very significant; the outcomes of my work are not likely to have important effects on other people.

Moderately significant.

Highly significant; the outcomes of my work can affect other people in very important ways.

5. To what extent does doing the job itself provide you with information about your work performance? That is, does the actual work itself provide clues about how well you are doing—aside from any "feedback" co-workers or supervisors may provide?

1 ————— 2 ————— 3 ————— 4 ————— 5 ————— 6 ————— 7

Very little; the job itself is set up so I could work forever without finding out how well I am doing.

Moderately; sometimes doing the job provides "feedback" to me; sometimes it does not.

Very much; the job is set up so that I can get almost constant "feedback" as I work about how well I am doing.

Listed below are a series of statements representing possible feelings you might have about the Navy in general or your professional career choice. In the space provided, please circle the number that comes closest to describing your agreement with each of the following items.

	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
1. My chosen occupational specialty gives me a sense of well being.	1	2	3	4	5
2. I have a definite plan for my career.	1	2	3	4	5
3. Compared to other areas of my life, my chosen career is <u>not</u> very important to me.	1	2	3	4	5
4. If I were to describe myself to someone, I would probably begin by stating my occupational specialty.	1	2	3	4	5
5. I would accept almost any type of job assignment in order to stay in the Navy.	1	2	3	4	5
6. I am proud to tell others that I am part of the Navy.	1	2	3	4	5
7. I talk up the Navy to my friends as a great organization to work for.	1	2	3	4	5
8. I have a strategy for achieving my career goals.	1	2	3	4	5
9. I am sometimes dissatisfied with my choice of career fields.	1	2	3	4	5
10. I know what I need to do to reach my career goals.	1	2	3	4	5
11. My personal career objectives are not clear.	1	2	3	4	5
12. If I were to rank (in importance to me) all the things that I do, those things related to my career would be at or near the top.	1	2	3	4	5
13. Sometimes I wish I had chosen a different career field.	1	2	3	4	5
14. I identify strongly with my chosen occupational specialty.	1	2	3	4	5
15. I have not really decided what my career objectives should be yet.	1	2	3	4	5
16. For me, the Navy is the best of all possible organizations to work for.	1	2	3	4	5
17. I change my personal career objectives frequently.	1	2	3	4	5
18. Deciding to join the Navy was a definite mistake on my part.	1	2	3	4	5
19. I find that my values and Navy values are very similar.	1	2	3	4	5
20. I get a sense of pride from my chosen occupational specialty.	1	2	3	4	5
21. Being able to pursue a career in management is very important to me.	1	2	3	4	5
22. Being able to do the kind of work that will contribute to advancing my profession (e.g., occupational specialty) is very important to me.	1	2	3	4	5
23. It is important to me to be able to publish results of my work in professional journals regardless of its value to the Navy Medical Department.	1	2	3	4	5
24. Having a job which permits me to take on progressively more administrative responsibility is important to me.	1	2	3	4	5
25. I am extremely glad that I chose the Navy to work for over other organizations I was considering at the time I joined.	1	2	3	4	5
26. I would like to assume a position with more managerial responsibility.	1	2	3	4	5
27. In the long run, I would rather be respected by civilian specialists in my professional field than by my peers in the Navy.	1	2	3	4	5

Listed below are a number of statements which could be used to describe a job. Try to be as objective as you can in deciding how accurately each statement describes your job—regardless of whether you like or dislike your job.

Write a number in the blank beside each statement, based on the following scale:

How accurate is the statement in describing your job?						
1	2	3	4	5	6	7
Very Inaccurate	Mostly Inaccurate	Slightly Inaccurate	Uncertain	Slightly Accurate	Mostly Accurate	Very Accurate

- _____ 1. The job requires me to use a number of complex or high-level skills.
- _____ 2. The job is arranged so that I do not have the chance to do an entire piece of work from beginning to end.
- _____ 3. Just doing the work required by the job provides many chances for me to figure out how well I am doing.
- _____ 4. The job is quite simple and repetitive.
- _____ 5. This job is one where a lot of other people can be affected by how well the work gets done.
- _____ 6. The job denies me any chance to use my personal initiative or judgment in carrying out the work.
- _____ 7. The job provides me the chance to completely finish the pieces of work I begin.
- _____ 8. The job itself provides very few clues about whether or not I am performing well.
- _____ 9. The job gives me considerable opportunity for independence and freedom in how I do the work.
- _____ 10. The job itself is not very significant or important in the broader scheme of things.

Write the appropriate number in the blank beside each statement.

How satisfied are you with this aspect of your job?						
1	2	3	4	5	6	7
Extremely Dissatisfied	Dissatisfied	Slightly Dissatisfied	Neutral	Slightly Satisfied	Satisfied	Extremely Satisfied

- _____ 1. The amount of job security I have.
- _____ 2. The amount of pay and fringe benefits I receive.
- _____ 3. The amount of personal growth and development I get in doing my job.
- _____ 4. The people I talk to and work with on my job.
- _____ 5. The degree of respect and fair treatment I receive from my boss.
- _____ 6. The feeling of worthwhile accomplishment I get from doing my job.
- _____ 7. The chance to get to know other people while on the job.
- _____ 8. The amount of support and guidance I receive from my supervisor.
- _____ 9. The degree to which I am fairly paid for what I contribute to the Navy.
- _____ 10. The amount of independent thought and action I can exercise in my job.
- _____ 11. How secure things look for me in the future in the Navy.
- _____ 12. The chance to help other people while at work.
- _____ 13. The amount of challenge in my job.
- _____ 14. The overall quality of the supervision I receive in my work.

Use the scales listed below to describe the type of situation or environment in which you and the majority of members in your work group work. A choice toward either end of the scale indicates that word best describes your work environment, while a response toward the middle is more neutral or indicates you are not sure. Please circle the number that comes closest to describing your work environment in the Navy.

UNSTABLE	1	2	3	4	5	STABLE
UNCERTAIN	1	2	3	4	5	CERTAIN
COMPLEX	1	2	3	4	5	SIMPLE
UNCHANGING	1	2	3	4	5	CHANGING
SLOW GROWTH	1	2	3	4	5	RAPID GROWTH

Use this opportunity to communicate to the Chief, Dental Corps. Your responses are anonymous. Please be candid, legible, and concise.

Identify the three most positive aspects of serving in the Dental Corps.

1. _____

2. _____

3. _____

Identify the three areas of the Dental Corps which most need improvement.

1. _____

2. _____

3. _____

Thank you for your participation!

Please place your questionnaire in the pre-addressed envelope and return it to:

Commanding Officer
ATTN: LT Mark J. Bourne, MSC, USNR
Naval Health Research Center
P.O. Box 85122
San Diego, CA 92186-5122

Appendix C

Sample Comments Within Category Groupings

Below are samples of respondents' comments to two survey items. Preceding each set of samples is the category heading used to summarize those and similar comments. The two survey items requested:

- a.) identification of the three most positive aspects of serving in the Dental Corps
- b.) identification of the three areas of the Dental Corps that most need improvement

The Most Positive Aspects of Serving in the Dental Corps	% of Respondents*
Appreciates professional or social camaraderie	65%
Camaraderie / Social support system / The people / Lasting friendships Attitude of coworkers / Esprit de corps / Networking / Mentoring Consultation availability / Shared authority among colleagues Working with knowledgeable dental officers / Interaction with other specialties	
Appreciates officer training or education or residency opportunities	48%
Officer training essential / Training opportunities / Quality of training Advanced dental ed. opportunity / Dental residency program / GPR program C.E. programs / Specialty training / Orthodontic specialty residency opportunity	
Satisfied with enrichment/challenge/variety or working conditions	41%
Multiple career pathways / Different opportunities not available for civilians Excellent leadership/management opportunities Clinical rotations / Challenge / Sense of accomplishment Opportunity to practice dentistry / Providing dental treatment Opportunity for overall self-improvement / Personal growth Pride in job performed / Job satisfaction / Enjoy my job Enjoy the Dental Corps / Career dental officer / Good working conditions Milieu for professional growth / Professional satisfaction/development Opportunity for non-job-related activities / Sports / Recreation activities Emphasis on physical fitness	
Appreciates duty station or travel opportunity	41%
Operational tour / Shipboard experience / Overseas billet / Opportunity to travel New duty station / Variety of settings / Experiencing life all over the world / Cultural exposure / Flexibility in personal life to travel PCS mobility / Like moving every few years / Paid-for moving	
Appreciates Navy job conditions	15%
Can retire at early age / No overhead costs worry Can provide care despite inability to pay / Don't collect payments from patients No malpractice / Practicing free of business and legal burdens Security of knowing family is being taken care of Patients readily available / Large patient population / Young healthy patients Having duty officers for emergency patients Don't bring work home / Low stress level / No worries over sick or vacation time Regular hours / Time off / Regular vacation time / Leave and liberties	

* Due to multiple response possibility, values sum to more than 100 percent.

Enjoys military lifestyle or patriotism	15%
Enjoy Navy / Dedication to Navy / Dental Corps	
Putting on the uniform / Military man / Service to country	
Combine military with dental career	
Unique career / Unique life / Unique lifestyle / Quality of life	
Goal- and mission-oriented / Supporting our fighting forces	
Appreciates job security	12%
Job security / Tenure	
Appreciates quality of care	11%
Quality of care / Quality of service / Corps emphasis on "quality"	
Empathy for patients / Good infection control	
Appreciates retirement or health benefits	8%
Working for retirement / Satisfactory retirement benefit	
Benefits / Health benefits	
Appreciates pay	7%
Steady pay / Steady income / Stability of pay scales	
Pay regular and predictable / Good pay in the beginning	
Appreciates initial student loan deferment	
Appreciates material support	2%
Excellent facilities / Excellent equipment	
Appreciates impact on family	2%
Family-life compatibility / Family stability	
Satisfied with leadership or TQM	2%
Excellent leadership / Compassionate immediate bosses	
Support given to Dental Corps by line community	
Superiors are very supportive of my career goals	
TQM is an improvement	
Satisfied with promotion opportunities	2%
Like the prospects	

Aspects of the Dental Corps That Most Need Improvement	% of Respondents*
Dissatisfied with pay	79%
Pay / Financial / Poor pay / Pay and compensation / Increase pay	
Pay program for jr. officers / Pay at lower ranks / Pay discrepancy	
Bonus and professional pay higher in private practice / Salaries not in line	
Higher specialty bonus pay needed / Low specialty pays	
Increase the pay and bonuses / Bonuses / Improve professional pay program	
Special pay lessens when member enters residency training	
ASP during residency (lack of adequate income) / Dental school debt overwhelming	
Student loans unmanageable / Need loan deferment program	

* Due to multiple response possibility, values sum to more than 100 percent.

Dissatisfied with promotion opportunities

38%

No upward mobility / Promotion opportunity restricted
Not enough promotions / Promotion system / Clean up promotion
Slow promotion / Decreased promotion opportunity / Revive frocking
Consistency in promotion opportunity / Inequities in promotion potential
Promotion opportunities and equity / Minority advancement
Administration path forced on people for promotion
Increase importance of clinical dentistry for promotion
Civilian dentists get more credit for promotion
Difficult for doctors from private practice to advance
Eliminate separate agendas for training and promotion / Define promotion criteria
Need input from specialty board for selection / Dissatisfied with augmentation process

Dissatisfied with leadership / TQM / Evaluation process

31%

Needs better leadership and management / Stronger leadership training
Most leaders are incompetent / Higher officers are inept / Leadership
Incompetent branch clinic directors / TQM not working / Micromanagement
Need command to enjoy dentistry / Lack of leadership / Lack of positive role models
Leaders of vision needed / Lack of communicated vision by leadership
Overall command organization / Need few executives / Too many chiefs per indians
Give control back to branch clinics / Give control to subordinates of department heads
LT and LCDR don't have enough authority / Red tape
Politics / Good ol' boy relationships / Favoritism / Buddy system
Abuse by senior officers / Treatment of juniors / TQM implementation
Fitness reports are poor measure of individual / Evaluation system unfair
Fitness reports not measuring main goal—dentistry / PRT

Objects to other current Navy/BUMED policies

17%

Realistic infection control (needed) / Consistency in procedure (needed)
Counting and ODR (need improvement) / CNT uniforms
Reduce civilian contracts / Competence of contractors
Parity with civilian hired practitioners / Better interchange with civilians
Friendship in the dental teams (shore and sea) / Kill DOPMA
Equal opportunity concerns / Retention and recruitment of minorities
Discontinue reverse discrimination of females and minorities
Dental officers should not lose credentials upon transfer
Dependent overseas screening / Overseas screening process
Dental care available to few dependents/retirees
Service to fleet / Service to the fleet before deployment
Too many large clinics vs. small / Have to work in the big clinics to be seen
Differences from clinic to clinic (excessive) / Regionalization
Budget restraints in the military overall / OPTARS too low
Budget planning and allocation / Food allowance not good
Get dental officer input for dental spaces before ship construction
Need for computer education (ADP) / Increase interaction of Dental Corps and line
MSC should be utilized to free dentists to treat patients
Dental Corps losing autonomy / DC officers are second class to Medical Corps

Objects to shortage of chairside dental officers

16%

Need retain/acquire quality dental officers / Dental officer shortage
Senior personnel not chairside / Active practice by senior staff
Retired officers stay in billets
Retention of nonproductive personnel
Release from active duty senior officers
Retention inducements / Lack of specialty officers
Lack of availability of specialty care / Lack of specialty officers
Need periodontists / Need oral pathologists

Objects to administrative requirements or collateral duties	16%
No administrative support / Too much administration / Bureaucracy in paperwork	
Decrease paperwork / Too much paperwork / Reduce reporting requirements	
Decrease paperwork and accounting procedures / DIRS	
Dentists aren't chairside enough due to too much admin.	
Too many collateral duties	
Dissatisfied with recognition or support	14%
Overworking staff / Lack of communication / Lack of contact	
Need for officers to voice opinions without fear of retribution	
Constant looking over the shoulder	
Constant worry to accept every task/duty	
Dental officers treated as children / Disrespect for subordinates	
Disregard for personal wishes / Not open to suggestions/new ideas	
Need open and honest input / Teamwork not encouraged	
Recognition / Personal recognition / Limited positive feedback	
Dissatisfied with duty station or detailing process	10%
Duty stations in less desirable places / Unable to get duty station	
Transfers / Assignments / Location of assignment	
Personnel assignments / Equality of PCS / Detailing process	
New commissioned dental officers get operational billets	
More operational billets / Needs more overseas billets	
Hate sea duty / Sea duty objection / Overseas objection	
Mandatory overseas time / All should serve at sea	
Tours should be longer / No homesteading	
Dissatisfaction with officer training/residency programs/opportunities	10%
Increase training / Training not available / Selection for training	
Educational opportunity / Professional training opportunity	
Continuing education / Increase professional seminars	
Increase specialty training programs / Training/education for specialists inadequate	
More liberal training in orthodontic and postorthodontic	
Additional training for overseas slots / Emphasis on training	
Training of junior dental officers to be naval officers	
Reward for residency training / Eliminate advanced clinical dentistry program	
ACP programs / Less C.M.E. programs / Overhaul training programs	
Trained people-clinical, not administrative / Inadequate competence of dental officers	
Too long to get education / Shorter time for training	
Funding for education / Not enough TAD funding for continuing education	
Objects to limited enrichment/opportunity/challenge/variety	10%
Need administrative career path / Career progression / More rotations	
Being restricted to operative dentistry / Want to practice complete dental science	
Waste time on things not directed to professional development	
Loss of goal (to provide dentistry) / Loss of professional ethics	
Job challenge and diversity (needed) / Tired of patient care	
More variety/stimulation wanted / Variety of job opportunity	
Other job opportunities not readily available / Need better opportunity	
Tour not professionally rewarding / Not fun / Decrease pressure for more productivity	
Time for research (needed) / Time to teach (needed) / More time for fitness (needed)	
Lack of opportunities for minorities / Limited opportunities of career paths for women	
Operational opportunity for women / Junior lieutenants duty needs greater variety	
Jr. officers need to develop skills / Participation in professional program as junior officers	

Objects to dental or Dental Corps practices	10%
Need to provide sedation / Prevention of caries vs. treatment	
Dental Corps bias against oral surgeons / Specialists should do difficult cases	
Dental health care more responsible to operational needs	
Better coordinated fleet liaison programs	
No direct control over DT, supplies, patient flow / Need own supplies, DOR, DT, etc.	
Inefficient dental delivery system / Efficiency in clinical treatment	
Rethink blue-green shift / Credentialing program	
Dental readiness figures are inaccurate and misleading	
Screen MSC officers to serve as DTFs	
Dissatisfied with competence of enlisted staff	9%
Need better-trained dental technicians / Quality of dental technicians	
Enlisted A, C, and prosthetic C school (needs improvement)	
Expand training opportunities for DT	
Dental technical support staff / Technician support / Better lab support	
Need to be able to handle their own / Need quality personnel	
Lack of motivation in enlisted / Poor attitude of enlisted personnel	
Lack of incentives for enlisted / Enlisted promotion and pay raise	
Dissatisfied with enlisted staffing	8%
Number of dental technicians / Need retention of DTs	
Better allocation of DTs / DT utilization / Expand ancillary functions	
Clerical staff lacking and DTs are filling in / Lack of admin. support	
Enlisted staffing insufficient / Auxiliary support insufficient	
Dissatisfied with material support	7%
Supply access / Supplies problems / Supply system / Needs to be quicker	
Supplies not evenly distributed from command to command	
Equipment problems / Required to do more with less	
Resource utilization / Updating stock tables / Bad facilities / Newer facilities	
Dissatisfied with career guidance	6%
Uncertainty of career plan / Quality of guidance to junior dental officers	
Idea that there is one career pattern that fits all / Defined career paths for all	
Mentoring	
Dissatisfied with job security	5%
No tenure / No job security / Job security for junior officers	
Lack of job security due to DOPMA / DOPMA scares	
Need more alternatives to a 20-year career	
Dissatisfied with morale	4%
Morale / Low morale among junior officers	
Loss of team effort / Lack of dedication and view of big picture	
Need change of attitude of Navy dentists / Backstabbing / Too much competitiveness	
Specialize-or-perish mentality / No benefit to working hard—get more to do	
Dissatisfied with impact on family	3%
Improve family life / No stable family life / Stability / Family separation	
Dissatisfied with administrative vs. clinical emphasis	2%
Support the clinical dentist / Support of clinicians by administrators	
Lack of appreciation of clinical skills / Recognition for clinical - not administrative	

Dissatisfied with retirement or health benefits	2%
Poor retirement benefits / Erosion of benefits	
Poor family medical care / Poor quality of health care	
Put oral surgeon on carrier and give wartime benefits	
Dissatisfied with moving / PSD support	1%
PCS orders / Orders / Moves	
Treatment of people while moving / PSD support poor	
Moving costs / Moves cause financial hardships	
Dissatisfied with quality of care	1%
Need to treat patients, not numbers / Patient treatment	
Increase after-hour emergency patient visits	
Dissatisfied with military lifestyle	1%
Don't know if military is for me / Lifestyle	
Improve base housing / Poor housing conditions	
Poor childcare available	
Objects to Quality Assurance restrictions	< 1%
(QA) Paperwork drills / QA system / Corps too obsessed with QA	

REPORT DOCUMENTATION PAGE			Form Approved OMB No. 0704-0188	
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503.				
1. AGENCY USE ONLY (Leave blank)		2. REPORT DATE May 1995		3. REPORT TYPE AND DATE COVERED Interim Apr 94 to May 95
4. TITLE AND SUBTITLE U.S. Navy Dental Corps Survey of 1994: Analysis of Narrative Responses			5. FUNDING NUMBERS Program Element: 65152N Work Unit Number: M0106.001-6422	
6. AUTHOR(S) Mark Bourne, LT, MSC, USNR; Susan M. Hilton; Larry Shaw, LCDR, DC, USN				
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(S) Naval Health Research Center P. O. Box 85122 San Diego, CA 92186-5122			8. PERFORMING ORGANIZATION Report No. 95-9	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(S) Naval Medical Research and Development Command National Naval Medical Center Building 1, Tower 2 Bethesda, MD 20889-5044			10. SPONSORING/MONITORING AGENCY REPORT NUMBER	
11. SUPPLEMENTARY NOTES				
12a. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution is unlimited.			12b. DISTRIBUTION CODE	
13. ABSTRACT (Maximum 200 words) Following recent changes in the organizational structure and mission of the U.S. Navy, the Chief of the Navy Dental Corps requested a study of organizational attitudes, perceptions, and outcomes. An anonymous survey was sent to all active-duty Navy Dental Corps officers. A total of 915 officers responded to the survey. Content analysis was conducted on the narrative responses to the items asking for the most positive aspects of serving in the Dental Corps and the aspects most in need of improvement. Results indicated that the leading positive aspects of Navy dentistry were: professional/social camaraderie, training/educational opportunities, on-the-job professional enrichment, opportunities for travel or particular duty assignments, military/patriotic lifestyle, and Navy-related job conditions. The leading aspects of Navy dentistry identified most often as in need of improvement were: pay, promotion, leadership, Navy policies, shortage of chairside Dental Corps officers, and administrative or collateral duty requirements. Results were assessed as a function of occupational specialty, gender, and career stage (rank). This study points to the importance of assessing qualitative information from the membership when defining the issues affecting complex military organizations.				
14. SUBJECT TERMS Naval Medicine, Navy Medical Personnel, Dental Corps, Dentists, Organizational Climate, Content Analysis			15. NUMBER OF PAGES 34	
			16. PRICE CODE	
17. SECURITY CLASSIFICATION OF REPORT Unclassified	18. SECURITY CLASSIFICATION OF THIS PAGE Unclassified	19. SECURITY CLASSIFICATION OF ABSTRACT Unclassified	20. LIMITATION OF ABSTRACT Unlimited	